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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

25

Application Number

10/673,394

Filing Date

September 30, 2003

First Named Inventor

Christopher EVANS

Art Unit

2162

Examiner Name

Jean M. CORRIELUS

Attorney Docket Number

19111.0127

ENCLOSURES (check all that apply)

☒ Fee Transmittal Form w/copy

☐ Fee Attached

☒ Amendment / Reply

☐ After Final

☐ Affidavits/declaration(s)

☒ 3-Month Extension of Time
Request w/copy

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority
Document(s)

☐ Reply to Missing Parts/
Incomplete Application

☐ Reply to Missing Parts
under 37 CFR 1.52 or 1.53

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a
Provisional Application

☐ Power of Attorney, Revocation
Change of Correspondence Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s) _____

☐ Landscape Table on CD

☐ After Allowance Communication to TC

☐ Appeal Communication to Board
of Appeals and Interferences

☐ Appeal Communication to TC
(Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☒ Other Enclosure(s)
(please identify below):

Request For Continued Examination
(RCE) w/copy
Substitute Specification

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm

BINGHAM McCUTCHEN LLP

Signature

Printed Name

Michael A. Schwartz

Date

February 22, 2007

Reg.
No.

40,161

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature

Typed or printed name

Date

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FEE TRANSMITTAL for FY 2006		Complete if Known		
		Application Number	10/673,394	
		Filing Date	September 30, 2003	
		First Named Inventor	Christopher EVANS	
		Examiner Name	Jean M. CORRIELUS	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2162	
TOTAL AMOUNT OF PAYMENT (\$)		1,810.00	Attorney Docket No.	19111.0127

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : _____

☒ Deposit Account Deposit Account Number: 19-5127(19111.0127) Deposit Account Name: BINGHAM McCUTCHEN LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments

Under 37 CFR 1.16 and 1.17

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims _____ **Extra Claims** _____ **Fee(\$)** _____ **Fee Paid (\$)** _____

_____ -20 or HP= _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims _____ **Extra Claims** _____ **Fee(\$)** _____ **Fee Paid (\$)** _____

_____ - 3 or HP= _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____	_____	_____

_____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount). _____

Other (e.g., late filing surcharge): 3-Month Petition For Extension of Time; Request For Continued Examination **1,810.00**

SUBMITTED BY

Signature	<i>Michael A. Schwartz</i>	Registration No. (Attorney/Agent)	40,161	Telephone	(202) 424-7500
Name (Print/Type)	Michael A. Schwartz	Date	February 22, 2007		